## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

10002009

CLAIMS AS FILED - PART I (Column 1)					(Colu	mn 2)	SMALL ENTITY TYPE T			OR	OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			26		}		ſ	RATE	FEE	) 	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	370.00	OR	BASIC FEE	740.00
то	TAL CHARGEA	BLE CLAIMS	26 minus 20=		. 6			X\$ 9=		OR	X\$18=	108
INDEPENDENT CLAIMS			4 minus 3 =		* /			X42=			X84≃	64
MULTIPLE DEPENDENT CLAIM PRESENT				·		1			OR		'ט /	
* If the difference in column 1 is less than zero enter					r "O" in o	olumn 2	Į	+140=		OR	+280=	
* If the difference in column 1 is less than zero, enter					Olumni Z		TOTAL		OR	TOTAL	932	
CLAIMS AS AMENDED - PAR (Column 1) (Column 1)					mn 2)	(Column 3)		SMALL E	NTITY	OR	OTHER SMALL I	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDN	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	<u> </u>	Minus	***		=		X42=		OR	X84=	,
L	FIRST PRESE	NTATION OF M	ULTIPLE DEP	ENDEN	CLAIM		1	+140≈.		OR	+280=	7.5
	,						L	TOTAL			TOTAL	
	(Column 1) (Colum					(Column 3)	Þ	ADDIT. FEE		Jon	ADDIT, FEE	
AMENDMENT B	¥	CLAIMS REMAINING AFTER AMENDMENT	I	HIGH NUM PREVIO PAID	IEST BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9≈		OR	X\$18=	
	Independent	*	Minus	***		=	lt	X42=		OR	X84≈	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT						1	+140=			+280=	
								TOTAL		OR	TOTAL	
		(Oakana 4)		(0-1	• • • • • • • • • • • • • • • • • • • •	(0-1	A	ODIT. FEE		OR	ADDIT. FEE	
		(Column 1) CLAIMS		(Colui		(Column 3)	1 -	<del></del>		,	<del></del>	
AMENDMENT C		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDN	Total	*	Minus	**		=		X\$ 9≈		OR	X\$18=	
AME	Independent	*	Minus	***		=		X42≈		OR	X84=	
<u>L</u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT						1					
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.							L	+140= TOTAL		OR	+280= TOTAL	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												

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CLAIMS AS FILED - PART I			l i			SMALL ENTITY			OTHER THAN			
·			(Column 1)		(Colu	(Column 2)		TYPE		OR	SMALL	ENTITY
TC	TAL CLAIMS		l					RATE	FEE		RATE	FEE
FO	R		NUMBER FILED		NUMBER EXTRA		ε	BASIC FEE	370.00	OR	BASIC FEE	740.00.
то	TAL CHARGEA	BLE CLAIMS	minus 20=		*			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS mir					*			X42=		OR	X84≈	, , , , , , , , , , , , , , , , , , ,
MULTIPLE DEPENDENT CLAIM PRESENT								+140≈			+280=	
* If the difference in column 1 is less than zero, enter					r "0" in c	olumn 2	L	TOTAL		OR	TOTAL	
CLAIMS AS AMENDED - PAR					TU			TOTAL		ION	OTHER	THAN
(Column 1) (Column					nn 2)	(Column 3)		SMALL E	NTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	26	Minus	**	9	= 0		X\$ 9=		OR	X\$18≃	
	Independent	* 4 NTATION OF MI	Minus	*** (	F CI AIM		I	X42=		OR	X84=	\·
	FIRST PRESE	NTATION OF MI	DETIPLE DEP	CINDEINI	CLAIIVI		' [	+140=		<b>Q</b> R	+280=	•
	•						<b>L</b> .	TOTAL ODIT. FEE		AO	TOTAL ADDIT, FEE	
	•	(Column 1)		(Colur	mn 2)	(Column 3)	_					]
AMEND MENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	* 25	Minus	** 6	26	=	$\prod$	X\$ 9≈		OR	X\$18=	
	Independent	* 4	Minus	***	et.	=	] [	X42=		OR	X84=	
	FIRST PRESE	NTATION OF MU	DETIPLE DEP	ENDEN	CLAIM		۱ ۲	+140=		OR	+280=	
							L	TOTAL			TOTAL	
		(Column 1)		(Colur	mn 2)	(Column 3)	AI	odit. Fee <b>L</b>		,	ADDIT. FEE	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IEST BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	$\prod$	X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		<u> </u>		X42=		OR	X84=	
<u> </u>	FIRST PRESE	NTATION OF M	JLTIPLE DEP	ENDEN	CLAIM		1	+140=			+280=	
		mn 1 is less than th					_	TOTAL		OR	TOTAL	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												